June 21, 2016

ATC Group Services
Attn: Mr. Robert Smith
46555 Humboldt, Suite 100
Novi, MI 48377

Project: Matrix Human Services

Dear Mr. Robert Smith,

Enclosed is a copy of the laboratory report for the following work order(s) received by TriMatrix Laboratories:

Work Order	Received	Description
1606226	06/09/2016	LBM

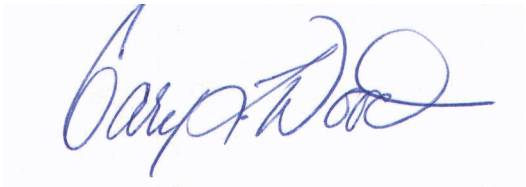
This report relates only to the sample(s) as received. Test results are in compliance with the requirements of the National Environmental Laboratory Accreditation Program (NELAP) and/or one of the following certification programs:

ANAB DoD-ELAP/ISO17025 (#ADE-1542); Arkansas DEP (#88-0730/13-049-0); Florida DEP (#E87622-24); Georgia EPD (#E87622-24); Illinois DEP (#200026/003329); Kentucky DEP (AL123065/#0021); Michigan DPH (#0034); Minnesota DPH (#491715); New York ELAP (#11776/53116); North Carolina DNRE (#659); Virginia DCLS (#460153/7952); Wisconsin DNR (#999472650); USDA Soil Import Permit (#P330-14-00305).

Any qualification or narration of results, including sample acceptance requirements and test exceptions to the above referenced programs, is presented in the Statement of Data Qualifications and Project Technical Narrative sections of this report. Estimates of analytical uncertainties and certification documents for the test results contained within this report are available upon request.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,



Gary L. Wood
Project Chemist

5560 Corporate Exchange Court SE ♦ Grand Rapids, MI 49512 ♦ 616.975.4500 ♦ Fax 616.942.7463 ♦ www.trimatrixlabs.com

PROJECT TECHNICAL NARRATIVE(s)

No Project Narrative is associated with this report.

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STATEMENT OF DATA QUALIFICATIONS

All analyses have been validated and comply with our Quality Control Program.
No Qualification is required.

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606226**
Project:	Matrix Human Services	Description:	LBM
Client Sample ID:	**1-KS-P-LBM Kitchen Sink Refrigerator Side**	Sampled:	06/07/16 06:40
Lab Sample ID:	**1606226-01**	Sampled By:	Charles Gheen
Matrix:	Drinking Water	Received:	06/09/16 16:30

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	**0.0017**	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/20/16 11:24	MSB	1606242

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606226**
Project:	Matrix Human Services	Description:	LBM
Client Sample ID:	**2-KS-P-LBM Kitchen Sink Microwave Side**	Sampled:	06/07/16 06:45
Lab Sample ID:	**1606226-03**	Sampled By:	Charles Gheen
Matrix:	Drinking Water	Received:	06/09/16 16:30

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/20/16 11:25	MSB	1606242

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606226**
Project:	Matrix Human Services	Description:	LBM
Client Sample ID:	**3-SF-P-LBM Sink Faucet Young Toddler Room**	Sampled:	06/07/16 06:50
Lab Sample ID:	**1606226-05**	Sampled By:	Charles Gheen
Matrix:	Drinking Water	Received:	06/09/16 16:30

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/20/16 11:26	MSB	1606242

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TRIMATRIX LABORATORIES

QUALITY CONTROL REPORT

Metals in Drinking Water by EPA 200 Series Methods

QC Type	Sample Conc.	Spike Qty.	Result	Unit	Spike % Rec.	Control Limits	RPD	RPD Limits	RL
Analyte: **Lead**/USEPA-200.8 Rev. 5.4									
QC Batch: 1606242 (Metals Direct Analysis)							Analyzed: 06/20/2016		By: MSB
Method Blank			<0.0010	mg/L					0.0010
Laboratory Control Sample		0.0400	**0.0383**	mg/L	96	85-115			0.0010

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TRIMATRIX LABORATORIES

PRETREATMENT SUMMARY PAGE

Client: **ATC Group Services**
Project: **Matrix Human Services**

Pretreatment	Lab Sample ID	Batch	By	Date & Time Prepared
USEPA 600/R-94/173	1606226-01	1606242	PNS	06/16/16 12:27
	1606226-03	1606242	PNS	06/16/16 12:27
	1606226-05	1606242	PNS	06/16/16 12:27

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TRIMATRIX LABORATORIES

Chain of Custody Record

COC No. 160611067

Pg. 1 of 1

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Phone (616) 975-4500 Fax (616) 942-7463 www.trimatrixlabs.com

For Lab Use Only
Cart 3
VOA Rack/Tray
Receipt Log No. 22-27
Project Chemist Jim McFadden
Work Order No. 1606226

Client Name: ATC Group Services
Address: 46555 Humboldt Drive, Ste 100
City, State Zip: Novi MI 48377
Phone: 248-669-5140 Fax 248-669-5147
Email robert.smith@atcassociates.net

Project Name: Matrix Human Services -LBM
Client Project No. / P.O. No.: 188BS16284
Invoice To: ☑ Client ☐ Other (comments)
Contact/Report To: Robert Smith

Analyses Requested

Lead - Primary (P): B
Lead - Flush (F) - Hold: B

PRESERVATIVES
A NONE pH~7
B HNO_3 pH<2
C H_2SO_4 pH<2
D 1+1 HCl pH<2
E NaOH pH>12
F ZnAc/NaOH pH>9
G MeOH
H Other (note below)

Schedule	Matrix Code	Sample Number		Field Sample ID	Cooler ID	Sample Date	Sample Time	COMP	GRAB	Matrix	Container Type (corresponds to Container Packing List)		Total	Sample Comments
											Number of Containers Submitted			
		01	1	1-KS-P-LBM Kitchen Sink refrigerator Side		6/7/16	640		X	DW	X		1	
		02	2	1-KS-F--LBM Kitchen Sink refrigerator Side		6/7/16	642		X	DW		X	1	
		03	3	2-KS-P-LBM Kitchen Sink Microwave Side		6/7/16	645		X	DW	X		1	
		04	4	2-KS-F-LBM Kitchen Sink Microwave Side		6/7/16	647		X	DW		X	1	
		05	5	3-SF-P-LBM Sink Faucet Young Toddler Room		6/7/16	650		X	DW	X		1	
		06	6	3-SF-F-LBM Sink Faucet Young Toddler Room		6/7/16	652		X	DW		X	1	
			7											
			8											
			9											
			10											

Sampled By (print): Charles D Gheen
Sampler's Signature
Company

How Shipped? Hand ____ Carrier ____
Tracking No.

Comments: **If lead or copper is above detection limits, please analyze flush samples**

LBM-Lil Brilliant Minds

1. Relinquished By	Date	Time	2. Relinquished By	Date	Time	3. Relinquished By	Date	Time
[signature]	6/9/16		Ray Johnson	6/9/16	1630			
1. Received By	Date	Time	2. Received By	Date	Time	3. Received For Lab By	Date	Time
Ray Johnson	6/9/16	1830				[signature]	6/9/16	16

ORIGINAL - LABORATORY COPY - SAMPLER

SAMPLE RECEIVING / LOG-IN CHECKLIST

TRIMATRIX LABORATORIES

Client: ATC	New / Add To	Work Order #: 1606226
Receipt Record Page/Line #: 22-27	Project Chemist	Sample #s

Recorded by (initials/date)		Qty Received	Thermometer Used	
LA 6/10/16	☒ Cooler ☐ Box ☐ Other______	1	☒ IR Gun (#202) ☐ Digital Thermometer (#54) ☐ Other (#_____)	☐ See Additional Cooler Information Form

	Cooler 1	Cooler 2	Cooler 3	Cooler 4
Cooler #	TM2389			
Time	0749			
Custody Seals: None	☒	☐	☐	☐
Present / Intact	☐	☐	☐	☐
Present / Not Intact	☐	☐	☐	☐
Coolant Type: Loose Ice	☐	☐	☐	☐
Bagged Ice	☐	☐	☐	☐
Blue Ice	☐	☐	☐	☐
None	☒	☐	☐	☐
Coolant Location: Dispersed / Top / Middle / Bottom				
Temp Blank Present: ☐ Yes ☐ No				
If Present, Temperature Blank Location is: ☐ Representative ☐ Not Representative				

Cooler 1

	Observed °C	Correction Factor °C	Actual °C
Temp Blank:			
Sample 1:	22.8	-	22.8
Sample 2:	22.7	-	22.7
Sample 3:	22.8	-	22.8

3 Sample Average °C: 22.8

☐ Cooler ID on COC?
☐ VOC Trip Blank received?

Coolers 2–4 (Observed °C / Correction Factor °C / Actual °C for Temp Blank, Sample 1, Sample 2, Sample 3; 3 Sample Average °C: ____; ☐ Cooler ID on COC?; ☐ VOC Trip Blank received?) — not filled in.

If any shaded areas checked, complete Sample Receiving Non-Conformance and/or Inventory Form

Paperwork Received

Yes	No	
☒	☐	Chain of Custody record(s)? If No, Initiated By ______
☒		Received for Lab Signed/Date/Time?
☐	☒	Shipping document?
☐	☒	Other ______

COC Information

☒ TriMatrix COC ☐ Other______

COC ID Numbers:

Check Sample Preservation

N/A	Yes	No	
	☒	☐	Temperature Blank OR average sample temperature, ≥6° C?
☒	☐	☐	If either is ≥6° C, was thermal preservation required?
☒	☐		If "Yes", Project Chemist Approval Initials:______
☒	☐		If "Yes" Completed Non Con Cooler - Cont Inventory Form?
☐	☒		Completed Sample Preservation Verification Form?
☐	☒	☐	Samples chemically preserved correctly?
☒	☐		If "No", added orange tag?
	☐	☒	Received pre-preserved VOC soils? ☐ MeOH ☐ Na_2SO_4

Check COC for Accuracy

Yes	No	
☒	☐	Analysis Requested?
☒	☐	Sample ID matches COC?
☒	☐	Sample Date and Time matches COC?
☒		Container type completed on COC?
☒	☐	All container types indicated are received?

Check for Short Hold-Time Prep/Analyses

☐ Bacteriological
☐ Air Bags
☐ EnCores / Methanol Pre-Preserved
☐ Formaldehyde/Aldehyde
☐ Green-tagged containers
☐ Yellow/White-tagged 1 L ambers (SV Prep-Lab)

AFTER HOURS ONLY:
COPIES OF COC TO LAB AREA(S)
☒ NONE RECEIVED
☐ RECEIVED, COCs TO LAB(S)

Sample Condition Summary

N/A	Yes	No	
	☐	☒	Broken containers/lids?
	☐	☒	Missing or incomplete labels?
	☐	☒	Illegible information on labels?
	☐	☒	Low volume received?
	☐	☒	Inappropriate or non-TriMatrix containers received?
☒	☐	☐	VOC vials / TOX containers have headspace?
☐	☐	☒	Extra sample locations / containers not listed on COC?

Notes

☐ Trip Blank received ☐ Trip Blank not listed on COC

Cooler Received (Date/Time)	Paperwork Delivered (Date/Time)	≤1 Hour Goal Met?
6/9/16 1630	6/10/16 0845	Yes / No

TRIMATRIX LABORATORIES — SAMPLE PRESERVATION VERIFICATION FORM

Client	Work Order #
ATC - LBM	1606226
Receipt Log #	**Completed By (initials/date)** / **Project Chemist**
	LR 6/10/16

COC ID # 1606110067 — Adjusted by: _____ Date: _____

Container Type	5 / 23	4	13		6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1					✓			
COC Line #2					✓			
COC Line #3					✓			
COC Line #4					✓			
COC Line #5					✓			
COC Line #6					✓			
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

DO NOT ADJUST pH FOR THESE CONTAINER TYPES

Comments

COC ID # — Adjusted by: _____ Date: _____

Container Type	5 / 23	4	13		6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1								
COC Line #2								
COC Line #3								
COC Line #4								
COC Line #5								
COC Line #6								
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

DO NOT ADJUST pH FOR THESE CONTAINER TYPES

Comments

pH Strip Reagent #

☑ 6040263

☐ _____

Aqueous Samples: For each sample and container type, check the box if pH is acceptable. If pH is not acceptable for any sample container, record pH in box, and note on Sample Receiving Checklist and on Sample Receiving Non-Conformance Form. If approved by Project Chemist, add acid or base to the sample to achieve the correct pH. Add up to, but do not exceed 2x the volume initially added at container prep (see table below for initial volumes used). Add orange pH tag to sample container and record information requested. Record adjusted pH on this form. Do not adjust pH for container types 6 and 15.

Container Size (mL)	Original Vol. of Preservative (mL)
Container Type 5	NaOH
500	2.5
1000	5.0
Container Type 4	H_2SO_4
125	0.5
250	1.0
500	2.0
1000	4.0
Container Type 13	H_2SO_4
500	2.5